IN THE UNITED STATES DISTRICT COURT FOR THE WESTERN DISTRICT OF TENNESSEE WESTERN DIVISION 11 SE

Derrell D. McBroom Jr. #11126400	THOMAS I.I. GOULD CLERK, U.S. DISTRICT COURT W/D OF TN, MEMPHIS
(Enter above the full name of the plaintiff or plaintiffs in this action.)	

vs.

Shelby County Jail et. Al Correct Care Solutions

(Enter above the full name of the defendant or defendants in this action.)

COMPLAINT FOR VIOLATION OF CIVIL RIGHTS UNDER 42 U.S.C., §1983

- I. Previous Lawsuits
 - A. Have you begun other lawsuits in state or federal court dealing with the same facts involved in this action or otherwise relating to your imprisonment? Yes () No
 - B. If your answer to A is yes, describe each lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, using the same outline.)

1.	Parties to this previous lawsuit
Pla	aintiffs:
De	fendants:
2.	Court (if federal court, name the district; if state court, name the county):
3.	Docket Number:
4.	Name of judge to whom case was assigned:
5.	Disposition (for example: Was the case dismissed? Was it appealed? Is it still pending?)
6.	Approximate date of filing lawsuit:
7.	Approximate date of disposition:

II.	Place of Present Confinement: 201 POPLATADE 38103 (Shelby Country JA!)
	A. Is there a prisoner grievance procedure in the institution?
	Yes (No () B. Did you present the facts relating to your complaint in the state prisoner grievance procedure? Yes No () C. If your answer is Yes: 1. What steps did you take? I what steps did you take? 2. What was the result? No resumles as of yet, they still clame
	to be looking for Medical Records/ still Pending after 2 months D. If your answer is No, explain why not:
III.	Parties (In item A below, place your name in the first blank and place your present address in the second blank. Do the same for additional plaintiffs, if any.)
	A. Name of Plaintiff Derrell D. McBroom Jr
	Address 201 Poplar AUE MEM. To 38103
	(In item B below, place the full name of the defendant in the first blank, his official position in the second blank, and his and his place of employment in the third blank. Use Item C for the names, positions, and places of employment of an additional defendants.) B. Defendant "Mental Health Doctor or cant spell ris employed as INC MENTAL HEALT DOCTOR at 301 Poplar Auc Memphs In 38103 C. Additional Defendants: Bill Oldham Sheriff Shelby Co. Chief Bower, Charlene meghee, Patricia fields, Wanda Boga
IV.	Statement of Claim
	State here as briefly as possible the <u>facts</u> of your case. Describe how each defendant is involved. Include also the names of other persons involved, dates, and places. Do not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Use as much space as you need. Attach extra sheet if necessary.
Aum And My then form	ame to Jail on 7-2-11. I'm a Veteran and suffer from & erous mental Disorders. I've been put in lock down

V. Relief

State briefly exactly what you want the court to do for you. Make no legal arguments.

Cite no cases or statutes.

FOR NO other veteran to go through the same things

The Deen through.

Ke-clo Medical Contract

23 million

up grade laws on 503 and provisions

need a Mental Health staff instead of religing on medical staff

VI. Jury Demand
I would like to have my case tried by a jury. Yes No().

I (We) hereby certify under penalty of perjury that the above complaint is true to the best of our information, knowledge, and belief.

Signed this 7th day of 50 ptember, 2011.

The May (Signature of Plaintiff/Plaintiffs)

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THOMAS M. GOLD TW. US DISTRICT CONT WID OF THE MEMPHS

WE DISTRICT CONT WID OF THE MEMPHS

SHEEL STATE ST

SHELBY COUNTY JAIL

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US District Court W. Doftens 242 Federal Bld 5 167 W. Main Mamphis TN 3863

